PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/734055

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EI	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			91				1	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			9/ minus 20=		. 7/			XS 9=		OR	X\$18=	1278
INDEPENDENT CLAIMS			/2 minus 3 =		* 9		G.	X43=		OR	X86=	774
MU	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	0
* If the difference in column 1 is less than zer er					"0" in c	column 2		TOTAL		OR	TOTAL	<i>282</i> 2
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	(Colun			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	+290=	
										OR	TOTAL	
(Oaluma 4)								ADDIT. FEE		OR	ADDIT. FEE	<u> </u>
	(Column 1) (Colum CLAIMS HIGH				(Column 3)	1 1		ADDI-	1 (ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								· 45=		OR	+290=	
	LATCT EER TYDGA									OR	TÖTAL ADDIT. FEE	L
		•										
AMENDMENT C	· ·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	0
	Independent	*	Minus	***		=]	X4.3=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** 1	f the "Highest Nur	mber Previously Pa mber Previously Pa mber Previously Pa	iid For [*] IN THI	S SPACE is	less tha	n 20, enter "20.	- A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		ber Previously Paid					er fou	nd in the app	ropriate box	k in col	umn 1.	